## VIA EMAJL

## RESPONSE REQUESTED BY APRIL 29, 2008

To:

All County NVRA Staff

FROM:

Irene E. Capps

NVRA PROGRAM MANAGER

REQUEST FOR MONTHLY VOTER REGISTRATION INFORMATION

Please indicate the number of voter registrations you received from Non-DMV NVRA Subject:

COVERED AGENCY OFFICES\* in your county during the month of

\*This includes applications for new or renewals from various social services agencies, including food stamps, AFDC, IHSS, MediCal, and Women and Infant Children programs (WIC), welfare services, rehabilitation and those serving the disabled population, Independent Living Centers, military recruitment, Franchise Tax Board, Board of Equalization. Social Security, and Department of Mental Health. If the agency previously received its voter registration applications from the Secretary of State's office, you must obtain the serial numbers of those cards from them for reporting purposes.

purposes. COUKA County	
NAME OF COUNTY: CONTACTOR OF COUNTY	
CONTACT PERSON: K. MOVOM	
PHONE NUMBER: 330 458 000	
E-MAIL ADDRESS: CCC LEVK O COUNTY of COUNTY OF	7
If you have any questions, please feel free to contact me at (916) 657-2166. Please email your response to me at irene.capps@sos.ca.gov or FAX your completed form to me at (916) 653-3214. Thank you!	ļ

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